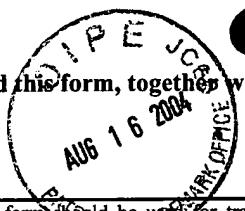


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail



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JFW
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21888 7590 06/03/2004

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Karen J. Bauer	(Depositor's name)
<i>Karen J. Bauer</i>	(Signature)
<i>Aug 16, 2004</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/111,911	07/08/1998	WILLIAM S. M. WOLD	16153-5587	6287

TITLE OF INVENTION: INHIBITING APOPTOSIS WITH ADENOVIRUS RID PROTEIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/03/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
SHUKLA, RAM R		1632	424-093600		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Saint Louis University

St. Louis, MO

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)  (Date) 8/12/04
Daniel S. Kasten

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08/17/2004 NMKOME1 00000078 09111911

01 FC:2501	665.00	OP
02 FC:1504	300.00	OP
03 FC:8001	30.00	OP